04/13/2001

PTO/SB/21 (08-00)

09/834,672

Approved for use through 10/31/2002. OMB 0651-0031

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**Application Number** 

## **TRANSMITTAL FORM** (to be used for all correspondence after initial filing)

**Filing Date** 

Robert W. Pries **First Named Inventor** 

3635 **Group Art Unit** 

**Kevin McDermott Examiner Name** 

Total Number of Pages in This Submission		ission 20	Attorney Docket Number	056267-0003		
ENCLOSURES (check all that apply)						
Fee Transmittal Form Fee Attached  Amendment / Reply  After Final Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Document(s)  Response to Missing Parts/ Incomplete Application  Response to Missing Parts under 37 CFR 1.52 or 1.53		Assignment Papers (for an Application)  Drawing(s)  Licensing-related Papers  Petition  Petition to Convert to a Provisional Application  Power of Attorney, Revocation Change of Correspondence Address  Terminal Disclaimer  Request for Refund  CD, Number of CD(s)  Remarks		After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information  Status Letter Other Enclosure(s) (please identify below): Return recpt postcard  **RECEIVE** NOV 0 4 2002 GROUP 360		
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Firm or William K. Baxter GODFREY & KAHN, S.C.  Signature  William K. Baxter GODFREY & KAHN, S.C.						
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## **TRANSMITTAL** for FY 2003

Patent fees are subject to annual revision.

X Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)	181	00
(Ψ)	101	

Complete if Known					
Application Number	09/834,672				
Filing Date	04/13/2001				
First Named Inventor	Robert W. Pries				
Examiner Name	Kevin McDermott				
Art Unit	3635				
Attorney Docket No.	056267-0003				

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)			
Check Credit card Money Other None	3. ADDITIONAL FEES			
X Deposit Account:	Large Entity   Small Entity			
Deposit Account.	Fee Fee Fee Fee Description Code (\$) Code (\$)	ee Paid		
Account   07-1509	1051 130 2051 65 Surcharge - late filing fee or oath	ee Falu		
Number Deposit	1052 50 2052 25 Surcharge - late provisional filing fee or			
Account Name Godfrey & Kahn, S.C.	cover sheet			
The Commissioner is authorized to: (check all that apply)	1053 130 1053 130 Non-English specification			
X Charge fee(s) indicated below X Credit any overpayments				
Charge any additional fee(s) during the pendency of this application	on 1804 920* 1804 920* Requesting publication of SIR prior to Examiner action			
Charge fee(s) indicated below, except for the filing fee	1805 1,840* 1805 1,840* Requesting publication of SIR after			
to the above-identified deposit account.	Examiner action			
FEE CALCULATION	1251 110 2251 55 Extension for reply within first month	55		
1. BASIC FILING FEE	1252 400 2252 200 Extension for reply within second month			
Large Entity Small Entity	1253 920 2253 460 Extension for reply within third month			
Fee Fee Fee Fee Fee Description Fee Paid Code (\$)	1254 1,440 2254 720 Extension for reply within fourth month			
1001 740 2001 370 Utility filing fee	1 1255 1,960 2255 980 Extension for reply within fifth month			
1002 330 2002 165 Design filing fee	1401 320 2401 160 Notice of Appeal			
1003 510 2003 255 Plant filing fee	1402 320 2402 160 Filing a brief in support of an appeal	<u> </u>		
1004 740 2004 370 Reissue filing fee	1403 280 2403 140 Request for oral hearing			
1005 160 2005 80 Provisional filing fee	1451 1,510 1451 1,510 Petition to institute a public use proceeding	<u> </u>		
SUBTOTAL (1) (\$)	1452 110 2452 55 Petition to revive - unavoidable			
	1 1453 1,280 2453 640 Petition to revive - unintentional			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	E 1501 1,280 2501 640 Utility issue fee (or reissue)			
Ext <u>ra Claims below</u> Fee Paid	d 1502 460 2502 230 Design issue fee			
Total Claims $14$ $-20^{++} = 0$ $\times$ $5$ $= 6$	1503 620 2503 310 Planti ssue fee	3		
Independent Claims	1460 130 1460 130 Petitions to the Commissioner	<u>6</u>		
Multiple Dependent O = O	1807 50 1807 50 Processing fee under 37 CFR 1.17(q)			
Large Entity   Small Entity	1806 180 1806 180 Submission of Information Disclosure Stmt			
Fee Fee Fee Fee <u>Fee Description</u> Code (\$)	8021 40 8021 40 Recording each patent assignment per property (times number of properties)			
1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3	1809 740 2809 370 Filing a submission after final rejection (37 CFR 1.129(a))			
1203 280 2203 140 Multiple dependent claim, if not paid				
1204 84 2204 42 ** Reissue independent claims over original patent	1801 740 2801 370 Request for Continued Examination (RCE)			
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802 900 1802 900 Request for expedited examination of a design application			
	Other fee (specify)			
SUBTOTAL (2) (\$) /26	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)	22		

(Complete (if applicable) SUBMITTED BY Registration No. Telephone 414-273-3500 Name (Print/Type) 41,606 William K. Baxter (Attorney/Agent) Date 24/02 Signature

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